PART B - FEE(S) TRANSMITTAL

Complete and and this

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further coindicated unless corrected maintenance fee notification	rrespondence including the l below or directed otherwise as.	Patent, advance or in Block 1, by (a	ders and not specifying	a new corre	maintenance fees w spondence address;	ill be mailed to the currer and/or (b) indicating a sep	nt correspondence address as parate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
23117 75	90 03/14/2006							
NIXON & VANDERHYE, PC 901 NORTH GLEBE ROAD, 11TH FLOOR ARLINGTON, VA 22203				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
							(Depositor's name)	
							(Signature)	
							(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED IN			ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/049,379	10/049,379 02/12/2002			Houssam Ibrahim 2590-35			3689	
TITLE OF INVENTION: P	HARMACEUTICALLY STA	ABLE OXALIPLA	ATINUM PRI	EPARATIO	N FOR PARENTER	AL ADMINISTRATION		
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PUBLICATION FE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400			\$0	\$1400	06/14/2006	
EXAMINER		ART UNIT		CLASS	S-SUBCLASS			
SHEIKH, HUMERA N		1615	424-422000					
Change of correspondence CFR 1.363).	•		patent front page, list	· NITVON	& VANDERHYE P.O			
_ ´	lence address (or Change of (22) attached.	Correspondence	òr agents (OR, alternati			W VANDERIIE 1.C	
"Fee Address" indicate PTO/SB/47; Rev 03-02 (Number is required.	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
	RESIDENCE DATA TO B			•	• •		,	
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion of	low, no assignee of this form is NO	data will app I a substitute	ear on the p	atent. If an assigne	e is identified below, the	document has been filed for	
(A) NAME OF ASSIGNEE				data will appear on the patent. If an assignee is identified below, the document has been filed for T a substitute for filing an assignment 5/15/2006 MBEYEHE2 00000211 10049379 (B) RESIDENCE: (CITY and STATE OR COUNTRY)				
DEBIOPHARM S.A.							1400.00 OP 9.00 OP	
Please check the appropriate	e assignee category or categor	ries (will not be pri	inted on the p	natent) :	Individual 🔯 Con	rporation or other private gr	roup entity Government	
4a. The following fee(s) are	. Payment of	Payment of Fee(s):						
Issue Fee	A check in the amount of the fee(s) is enclosed.							
				 ☑ Payment by credit card. Form PTO-2038 is attached. ☑ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 14-1140 (enclose an extra copy of this form). 				
Advance Order - # of	Copies3		Deposit A	Account Nun	ber $14-1140$	ge the required fee(s), or cr conclose an ext	tra copy of this form).	
	(from status indicated above	•	<u> </u>					
••	MALL ENTITY status. See		• • •		·	L ENTITY status. See 37 (
NOTE: The Issue Fee and P interest as shown by the reco	ublication Fee (if required) words of the United States Pate	rill not be accepted ant and Trademark	from anyone Office.	e other than i	the applicant; a regis	tered attorney or agent; or t	cation identified above. the assignee or other party in	
Authorized Signature				_	Date5	-12-06		
Typed or printed name	Registration No. 33,363							
Alexandria, Virginia 22313-	on is required by 37 CFR 1.3 ity is governed by 35 U.S.C. opplication form to the USPTO for reducing this burden, shinia 22313-1450. DO NOT 1.1450.						nd by the USPTO to process) ing gathering, preparing, and ime you require to complete partment of Commerce, P.O. r for Patents, P.O. Box 1450,	